

## REQUEST FOR CORRECTED W-2



**TO: DPA - CENTRAL PAYROLL**

**FROM:** \_\_\_\_\_

**SUBJECT: CORRECTED W-2 FOR 2003 CALENDAR YEAR**

Employee's correct SSN \_\_\_\_\_

Employee's correct name,  
address and zip code

Agency's name, address and  
zip code

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employee's incorrect SSN \_\_\_\_\_

Employee's incorrect name \_\_\_\_\_

Enter **only** items to be changed

	PREVIOUSLY REPORTED	CORRECT INFORMATION
Federal taxable gross	_____	_____
Federal tax withheld	_____	_____
Medicare gross earnings	_____	_____
Medicare tax	_____	_____
State wages	_____	_____
State tax withheld	_____	_____

**I UNDERSTAND THAT CHARGES ASSESSED BY THE IRS FOR THIS  
CORRECTED W-2 (W-2C) WILL BE THE RESPONSIBILITY OF THIS  
AGENCY.**

\_\_\_\_\_  
**AUTHORIZED SIGNATURE**

\_\_\_\_\_  
**DATE**